PAGE 1/3

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation FEMINIST MAJORITY			
(b) Address (number and street) check if different than previous check if different than previo	ously reported		
(c) City, State and ZIP Code			
Arlington	VA 22209	3. FEC Identification Number	
Occupation and Name of Employer (for Individual Filers Only)		C C90010646	
4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report b) Is this Report an amendment? No Yes, it amends the report filed on THROUGH THROUGH			
TOTAL CONTRIBUTIONS TOTAL INDEPENDENT EXPENDITURES		200.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.			
TYPE OR PRINT NAME OF PERSON COMPLETING FORM		DATE ctronically Filed]	
Gaylynn Burroughs	Gaylynn Burroughs	10/30/2014	
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.			

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 3 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) **FEMINIST MAJORITY** Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Facebook 10 29 2014 Mailing Address 1 Hacker Way Amount Zip Code City State 50.00 Menlo Park CA 94025 Transaction ID: F57.4348 Purpose of Expenditure NC Office Sought: House Category/ State: Online Advertising - Students4Hagan Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: KAY R HAGAN Check One: Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2014 46620.07 Other (specify) for Office Sought Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Facebook 10 29 2014 Mailing Address 1 Hacker Way Amount City State Zip Code 50.00 Menlo Park CA 94025 Transaction ID: F57.4351 GA Purpose of Expenditure Office Sought: House Category/ State: Online Advertising - Students4Nunn Type Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: MARY MICHELLE NUNN Check One: X Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 21242.21 2014 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Twitter 2014 10 29 Mailing Address 1325 Market Street Amount Ste 900 State Zip Code City 50.00 CA 94103 San Francisco Transaction ID: F57.4349 Purpose of Expenditure Office Sought: NC House Category/ State: Online Advertising - Students4Hagan Type Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: KAY R HAGAN Check One: X Support Oppose Disbursement For: 2014 Primary General Calendar Year-To-Date Per Election 46670.07 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 150.00 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) FEMINIST MAJORITY		
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
Twitter	10 29 2014	
Mailing Address 1325 Market Street		
Ste 900 City State Zip Code	Amount	
San Francisco CA 94103	50.00 Transaction ID : F57.4350	
Purpose of Expenditure Online Advertising - Students4Nunn Category/ Type	Office Sought: House State: GA Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure: MARY MICHELLE NUNN	President Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought 21292.21	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
Mailing Address	M M / D D / Y Y Y Y Y	
	Amount	
City State Zip Code		
Purpose of Expenditure Category/ Type	Office Sought: House State:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
Mailing Address	M - M / D - D / Y - Y - Y	
Mailing Address	Amount	
City State Zip Code	Amount	
Purpose of Expenditure Category/ Type	Office Sought: House State:	
Name of Federal Candidate Supported or Opposed by Expenditure:	District: President	
	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	50.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	200.00	